

Testimony
Engrossed Senate Bill 2012 – Department of Human Services
House Appropriations – Human Resources Division
Representative Pollert, Chairman
March 12, 2015

Chairman Pollert, members of the House Appropriations Committee – Human Resources Division, I am Sandy Thompson, Director of West Central Human Service Center (WCHSC) and Badlands Human Service Center (BLHSC) for the Department of Human Services Department. I am here today to provide an overview of the budget request for WCHSC and BLHSC.

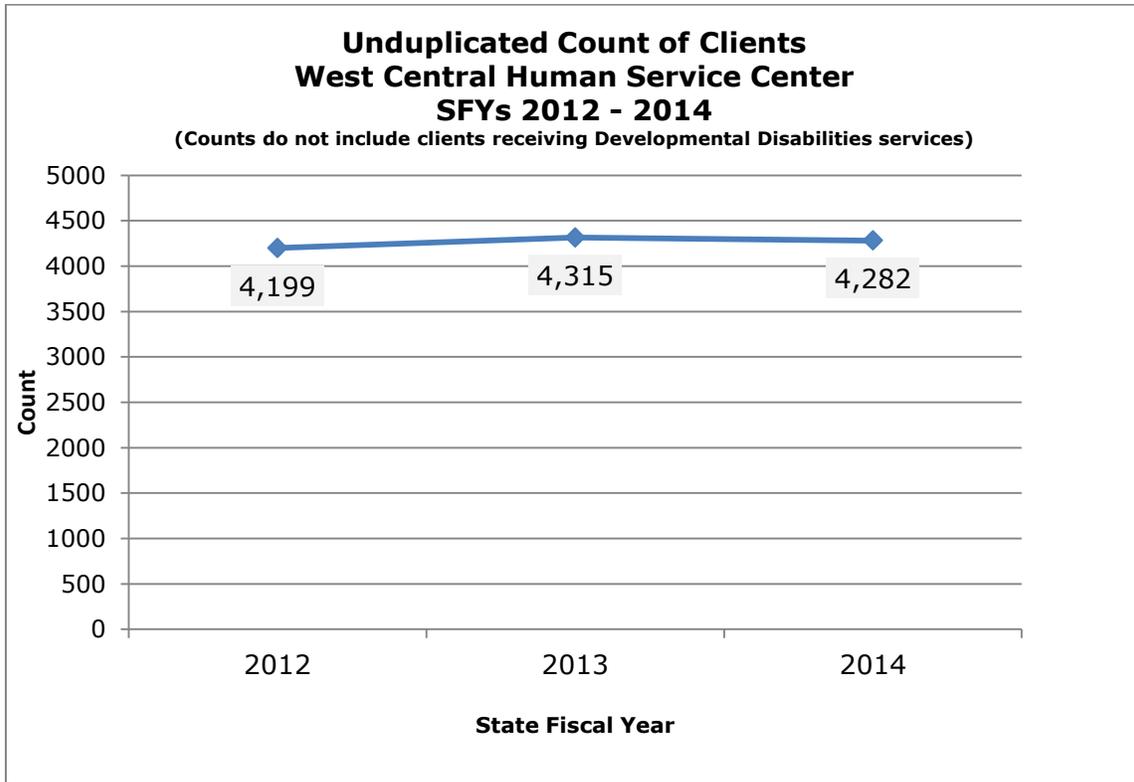
West Central Human Service Center

WCHSC serves the residents of Burleigh, Emmons, Grant, Kidder, McLean, Mercer, Morton, Oliver, Sheridan, and Sioux counties. Outreach services are offered in all counties, however, there are no physical outreach offices in this region.

Since 2012 WCHSC has seen a slight increase in both the numbers of consumers being served and the numbers of services being provided to consumers.

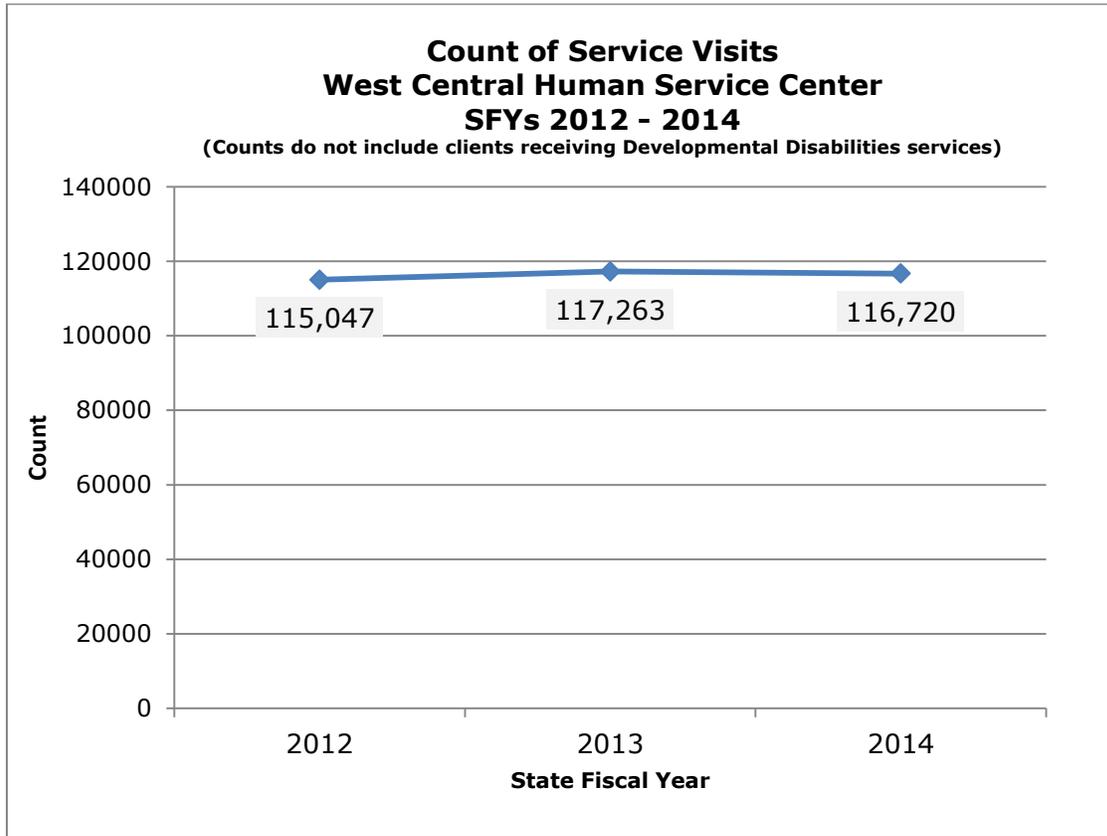
Caseload/ Customer Base:

Unduplicated Count of Clients – WCHSC SFY 2012 – 2014



The services included in the chart above are: individual, family, and group therapy, medication management, case management/care coordination, evaluations and assessments.

Count of Services – WCHSC SFY 2012 – 2014



The services included in the chart above are: individual, family, and group therapy, medication management case management/care coordination, evaluations and assessments.

Unduplicated Counts of Clients by Selected Programs Across the Human Service Centers July 2013 through June 2014

	NWHSC	NCHSC	LRHSC	NEHSC	SEHSC	SCHSC	WCHSC	BLHSC
Chemical Dependency	215	538	755	940	1162	387	1193	165
SMI Extended Care	88	174	92	420	724	249	359	102
Medical Services	708	1351	861	1270	1674	1157	1634	632
Outpatient Services	344	811	956	1252	1322	1078	1577	758
Children's Partnership Program	1	108	16	130	186	20	173	10
Low/Moderate-Risk Sex Offender Treatment		17	3	48	106		114	36

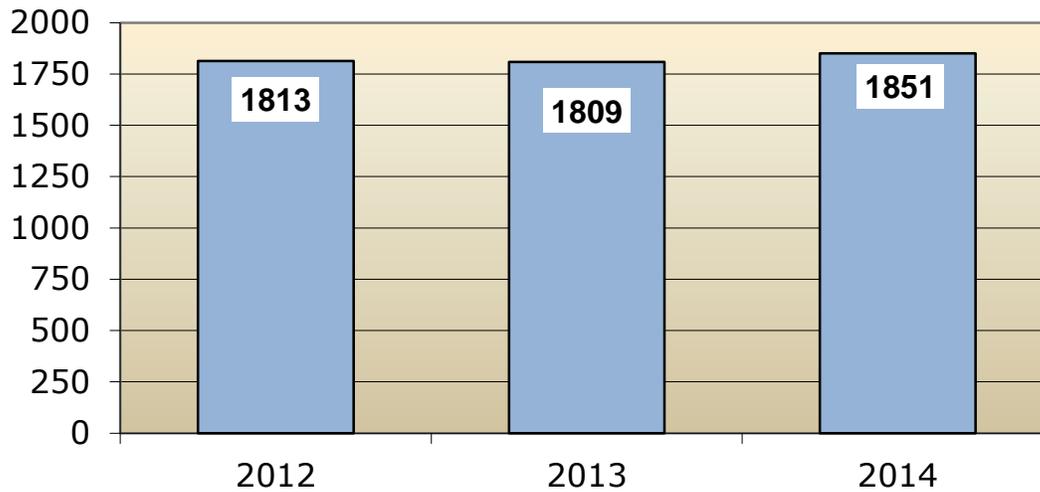
ROAP Program Enrollment Extract for SFY 2014. The data exclude program enrollments for Adolescent Treatment Center, Developmental Disabilities, and Dual Disordered (Intellectual Disabilities/Mentally Ill), HealthTracks, Infant Development, and Supported Employment.

Payor / Payment Type

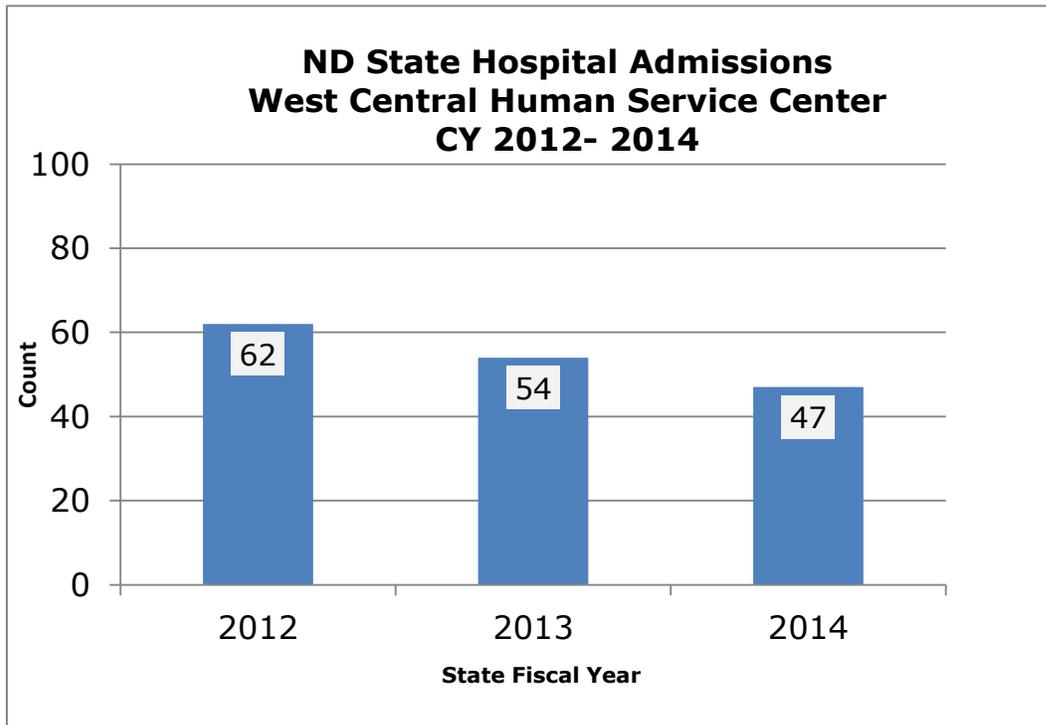
Percent of Patients Visits by Insurance Type in SFY 2014 (7/1/2013 – 6/30/2014)

	1-NW	2-NC	3-LR	4-NE	5-SE	6-SC	7-WC	8-BL
1) Medicare	2.6%	2.7%	4.5%	3.6%	3.2%	5.2%	3.0%	4.6%
2) Medicaid	51.7	24.5	34.4	42.3	44.0	52.7	36.6	37.6
4) Private	13.5	9.4%	11.7	9.4%	5.5%	8.0%	9.9%	16.5
5) Sliding Fee	29.4	61.7	47.4	38.4	45.1	23.5	40.7	20.0
6) Self-Pay	2.8%	1.8%	2.0%	6.3%	2.2%	10.7	9.9%	21.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

**Unduplicated Count of Clients Receiving
Developmental Disabilities Program Management
Services WCHSC
Caseload SFYs 2012-2014**

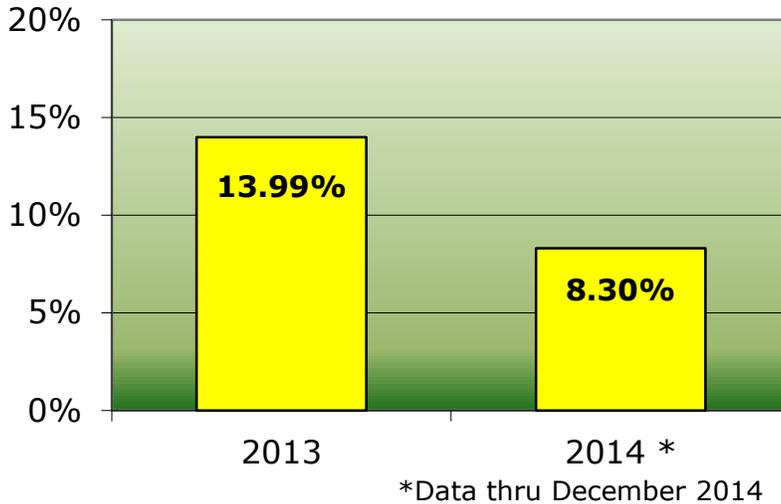


North Dakota State Hospital Admissions:



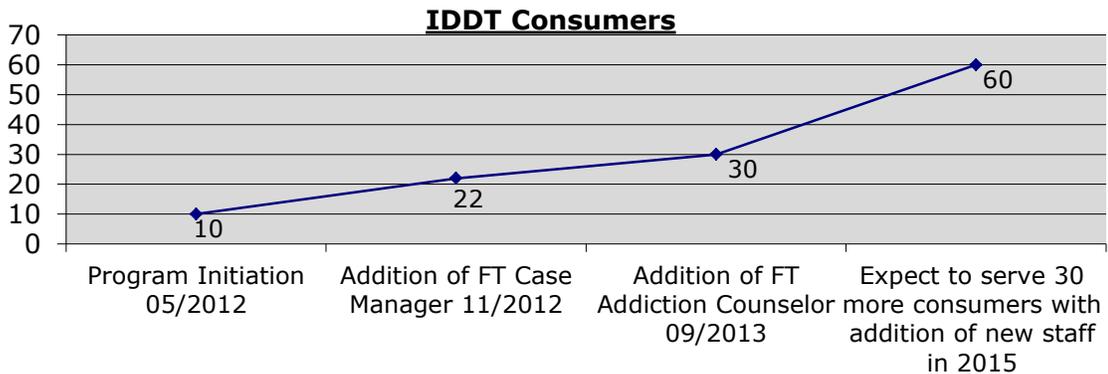
WCHSC continues to see an ongoing need for addiction services evidenced by the numbers of consumers in search of both adult and adolescent addiction services. To date, WCHSC has not had difficulty recruiting licensed addiction counselors and continues to be able to offer a large array of services. The Executive Budget includes an expansion of a current contract with a community partner for four beds for adults who have behavioral health issues. Utilization of these beds will assist this region’s efforts to increase our capacity for social setting detoxification management and minimize the need for referral to the ND State Hospital.

**Turnover Rates
West Central Human Service Center
CY 2013-2014**



Integrated Dual Disorder Treatment (IDDT):

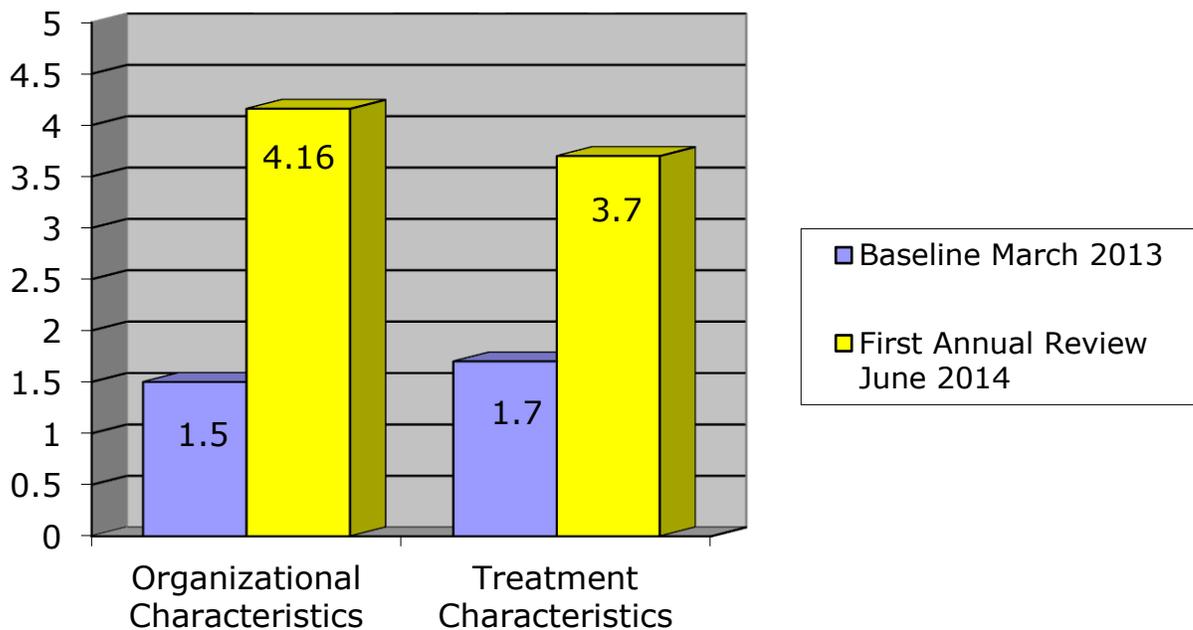
WCHSC has implemented and plans to expand the evidence-based practice of IDDT, which has been proven to improve the quality of life for individuals with co-occurring chronic mental illness and chronic substance use disorders. IDDT outcomes include reduced rates of relapse, hospitalization, arrest, incarceration, and utilization of high cost services while increasing continuity of care, quality of life outcomes, stable housing, employment, and independent living.



Fidelity to the IDDT program suggests no more than 10 to 15 consumers per full time IDDT staff person. WCHSC is currently providing IDDT services to 25 individuals and currently there are 50 consumers on a wait list for this program.

Funded in the executive budget is a request to add three additional full time positions that would allow us to serve 30 more consumers.

Fidelity Review - Baseline vs. First Annual Review



Note the improvement in both the organizational and treatment characteristics of the WCHSC IDDT program from March 2013 to June 2014.

Child Welfare Services:

The number of youth in foster care in Region VII appears to be stable at approximately 193 children.

What has increased has been the number of child abuse and neglect reports. In just four years this region has seen an increase of 118 reports per year. This increase in reports has led to an increase in the workload of the staff within the regional supervisors unit.

Child Welfare Services:

Total Number of Paid (reimbursement to county social services for completing an assessment) Child Protection Service Assessments

Region	SFY 2012	SFY 13	SFY14
Northwest	365	373	378
North Central	698	690	789
Lake Region	271	281	379
Northeast	922	908	935
Southeast	1,347	1,422	1,411
South Central	226	240	246
West Central	906	930	967
Badlands	295	287	451
Total	5,030	5,131	5,556

FRAME CPS Payment Report data

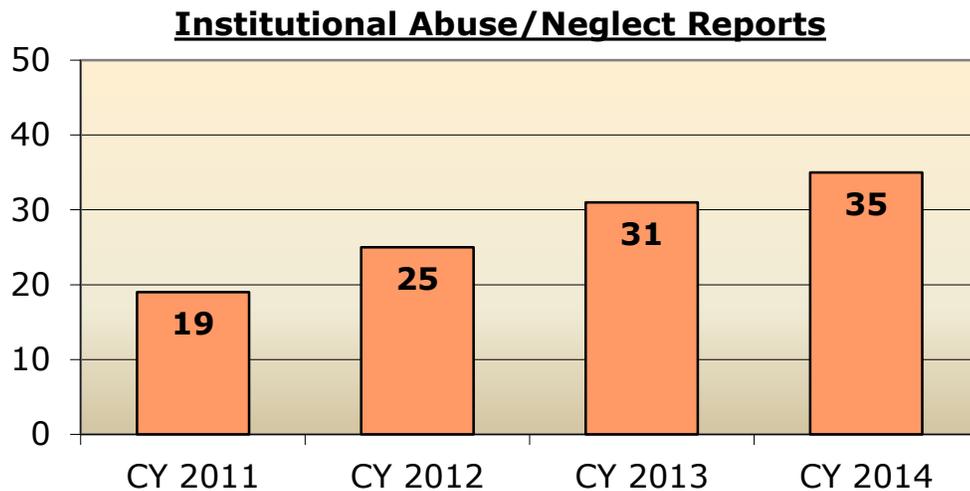
Number of Children in Foster Care by Region (as of the last day of the state fiscal year)

Region	06/30/2011	06/30/2012	06/30/2013	06/30/2014
Northwest	72	96	112	135
North Central	93	99	111	129
Lake Region	114	106	128	163
Northeast	141	155	186	225
Southeast	228	251	239	244
South Central	57	62	96	78
West Central	172	169	192	194
Badlands	40	59	52	74
Total	917	997	1,116	1,242

FRAME FC Demographic Report data – point in time

You will notice an increase in the number of institutional reports. These are reports of child abuse or neglect by the staff of a facility that serves children. In these situations the staff of the regional supervisor’s unit completes the assessments and offer their findings and recommendations.

The executive budget includes an increase of one full time staff person in the regional supervisors unit to accommodate the increase in workload related to the increases in both child abuse/neglect and institutional abuse/neglect reports.



Overview of Budget Changes – West Central Human Service Center

Description	2013-2015 Budget	Increase / (Decrease)	2015-2017 Executive Budget	Senate Changes	2015-2017 Budget To House
HSCs/Institutions	30,536,665	2,930,630	33,467,295	(486,671)	32,980,624
General Fund	16,855,018	2,801,934	19,656,952	(451,713)	19,205,239
Federal Funds	12,110,382	158,244	12,268,626	(34,958)	12,233,668
Other Funds	1,571,265	(29,548)	1,541,717	0	1,541,717
Total	30,536,665	2,930,630	33,467,295	(486,671)	32,980,624
Full Time Equivalent (FTE)	137.10	4.00	141.10	0.00	141.10

Budget Changes from Current Budget to Executive Budget:

The overall budget increased by \$2,930,630 and can be mainly attributed to the following:

- \$1,826,992 in total funds, of which \$1,652,466 is general fund needed to fund the Governor's compensation package.
- \$362,387 in total funds, of which \$238,791 is general fund needed to continue the employee increases approved by the last Legislative Assembly.
- The salary underfunding changed from \$305,611 to \$342,626, which is a net change of (\$37,015).
- \$387,247 in total funds, of which 100% is general fund included in the Executive Budget for the addition of an Advanced Clinical Specialist, a Registered Nurse II and a Human Service Aide II for the expansion of the Integrated Dual Diagnosis Treatment program.
- \$150,502 in total funds, of which \$136,995 is general fund was included in the Executive Budget for the addition of a child welfare regional supervisor to meet increased demand in child protective services and institutional abuse and neglect reports.
- An increase of \$49,513 for compensation for emergency on-call time.

- (\$337,746) for salaries primarily due to reclassification of a vacant, hard to fill Psychiatrist position in the current biennium. This position was filled with a Psychiatric Certified Nurse Specialist.
- An increase of \$51,157 in Travel based on increased rates established by the Department of Transportation for State Fleet vehicles.
- An increase of \$38,557 in Rentals/Leases, for office building rent, based on an increase in the rental rates for the 2015-2017 biennium.
- An increase of \$11,974 in IT-Communications based on expected utilization.
- Grants, Benefits and Claims increased by \$592,034 and is mainly attributed to the following:
 - \$283,500 to increase the bed capacity, from 10 beds to 14 beds, for the Adult Crisis Residential facility.
 - \$393,708 for provider inflationary increases of 4% each year of the biennium.

Senate Changes:

\$388,244 in total funds, of which \$353,286 is general fund to decrease the Governor's compensation package to reflect a change in the state employee performance increase from 3% - 5% to 2% - 4%, remove market policy point equity increase, and to remove the 1% retirement contribution.

\$98,427 in total funds, of which \$98,427 is general fund to decrease the annual provider inflation from 4% to 3% each year of the biennium.

This concludes my testimony on the 2015-2017 budget request for West Central Human Service Center. I would be happy to answer any questions.

Badlands Human Service Center

Badlands Human Service Center (BLHSC) serves the people of Adams, Billings, Bowman, Dunn, Golden Valley, Hettinger, Slope, and Stark counties. BLHSC has outreach offices in Beach, Bowman, Hettinger, and Mott.

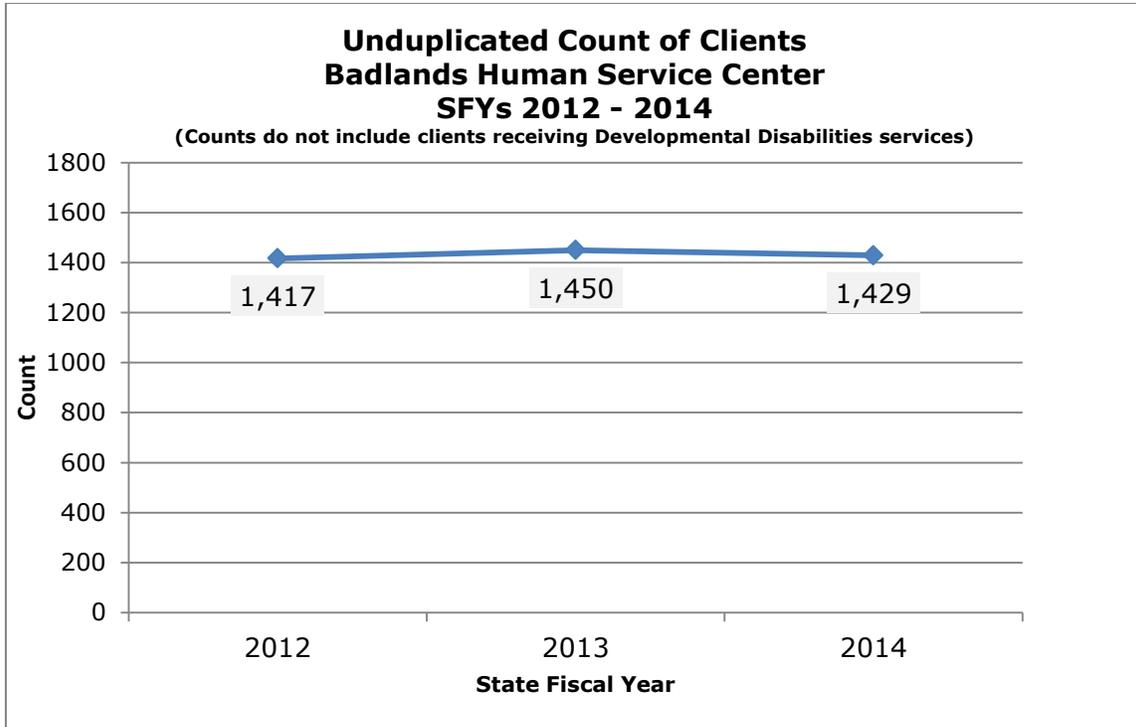
Due to oil impact on housing and the cost of living in Dickinson, finding and maintaining housing, especially affordable housing, continues to be an issue for the people we serve, as well as our employees.

This region's Community Mental Health Council has identified the highest priority concern as needing a facility to provide social detoxification management for people who are under the influence but do not need medical detoxification.

Since 2012 BLHSC has seen a slight increase in both the numbers of consumers being served and the numbers of services being provided to consumers.

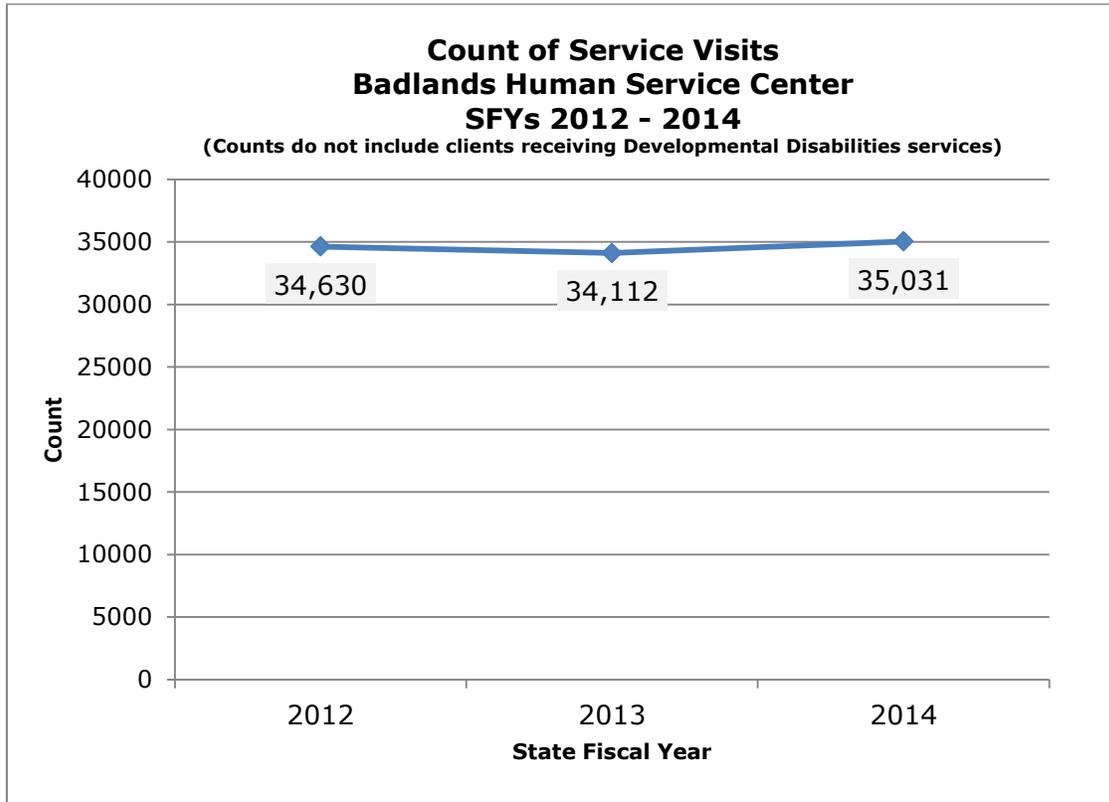
Caseload/ Customer Base:

Unduplicated Count of Clients – BLHSC SFY 2012 – 2014



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Count of Services – BLHSC SFY 2012 – 2014



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Selected Programs – Client Count

Unduplicated Counts of Clients by Selected Programs Across the Human Service Centers July 2013 through June 2014

	NWHSC	NCHSC	LRHSC	NEHSC	SEHSC	SCHSC	WCHSC	BLHSC
Chemical Dependency	215	538	755	940	1162	387	1193	165
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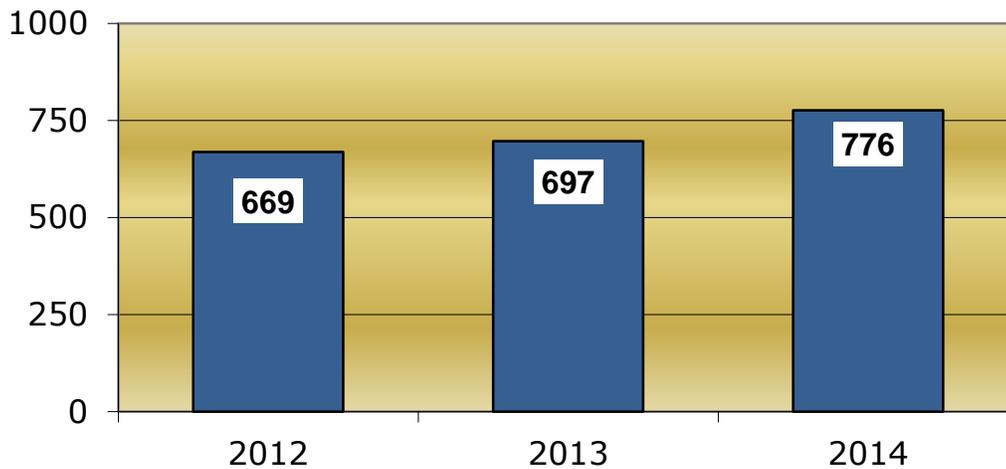
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Payer/Payment Type

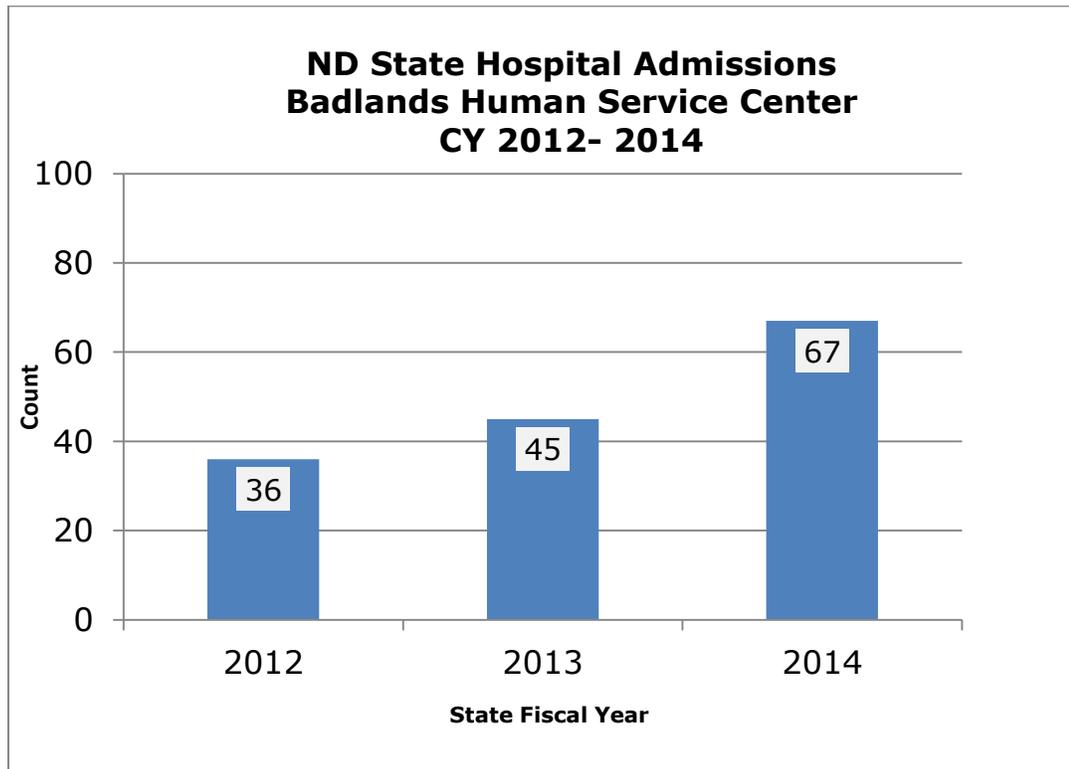
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2) Medicaid	51.7	24.5	34.4	42.3	44.0	52.7	36.6	37.6
4) Private	13.5	9.4%	11.7	9.4%	5.5%	8.0%	9.9%	16.5
5) Sliding Fee	29.4	61.7	47.4	38.4	45.1	23.5	40.7	20.0
6) Self-Pay	2.8%	1.8%	2.0%	6.3%	2.2%	10.7	9.9%	21.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Unduplicated Count of Clients Receiving Developmental Disability Program Management Services BLHSC Caseload SFYs 2012-2014



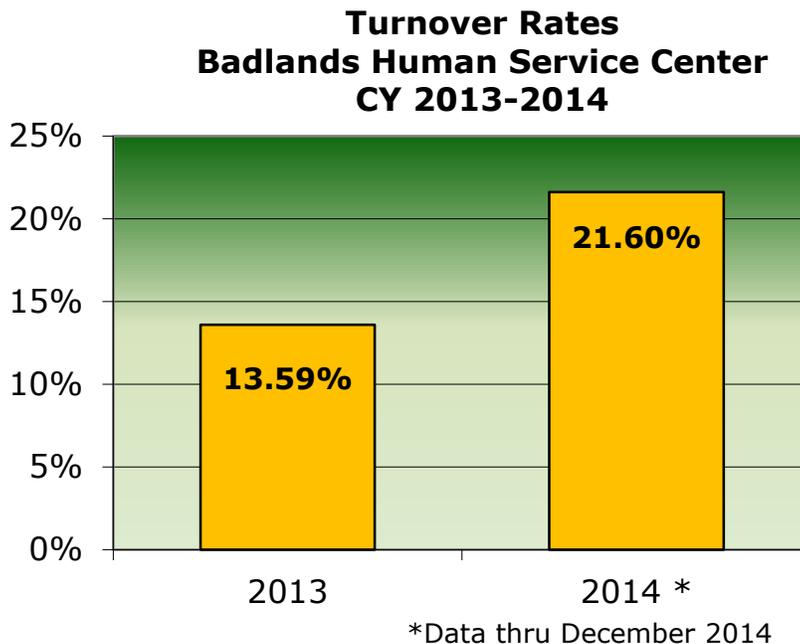
North Dakota State Hospital Admissions:



For the past two years this region has seen an increase in admissions to the North Dakota State Hospital, while the admissions to the psychiatric units in Bismarck have remained consistent. If the region had access to additional beds at a crisis/short term addiction and mental health residential facility, it could have accommodated many of those individuals by providing them services in or near their home community.

BLHSC does have access to one crisis bed and two female and two male addiction beds at BLHSC's multipurpose facility. The majority of the clients who currently reside at BLHSC's Residential Care Center (RCC) are adult consumers who are chronically mentally ill and in need of the safety and structure of a residential facility. Too often, when adults are in crisis, or are under the influence of alcohol or other drugs, and are admitted to RCC the climate of the facility is drastically upset.

Included in the executive budget is a request for a 10 bed facility that would be utilized for clients needing a short term stay for stabilization who are in a behavioral health crisis, in need of social detox management, or are receiving addiction services and in need of short term residential services. We anticipate this facility would also be used for our clients in the IDDT program who may be in need of the stability of a longer term residential stay. The five beds currently being utilized at the RCC for these purposes would then be available for those adults who struggle with chronic mental illness and are in need of a transitional living placement.



Integrated Dual Disorder Treatment (IDDT):

BLHSC has been implementing the evidence-based practice of IDDT, which has proven to improve the quality of life for individuals with co-occurring mental and chronic substance use disorders. IDDT outcomes include reduced rates of relapse, hospitalization, arrest, incarceration, and reduced utilization of high cost services while increasing continuity of

care, quality-of-life outcomes, stable housing, employment, and independent living. BLHSC will continue the operation of the IDDT program and will offer this program to more consumers over the 2015-2017 Biennium.

Child Welfare Services:

This region has also experienced an increase in both the number of reports of child abuse/neglect and numbers of children in foster care.

Total Number of Paid (reimbursement to county social services for completing an assessment) Child Protection Service Assessments

Region	SFY 2012	SFY 13	SFY14
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Overview of Budget Changes – Badlands Human Service Center

Description	2013-2015 Budget	Increase / (Decrease)	2015-2017 Executive Budget	Senate Changes	2015-2017 Budget To House
HSCs/Institutions	12,805,838	1,172,003	13,977,841	(193,615)	13,784,226
General Fund	7,521,396	1,034,355	8,555,751	(182,977)	8,372,774
Federal Funds	4,330,728	99,242	4,429,970	(10,638)	4,419,332
Other Funds	953,714	38,406	992,120	0	992,120
Total	12,805,838	1,172,003	13,977,841	(193,615)	13,784,226
Full Time Equivalent (FTE)	72.70	0.00	72.70	0.00	72.70

Budget Changes from Current Budget to Executive Budget:

The overall budget increased by \$1,172,003 and can be mainly attributed to the following:

- \$917,089 in total funds, of which \$860,546 is general fund needed to fund the Governor’s compensation package.
- \$196,740 in total funds, of which \$147,180 is general fund is needed to continue the employee increases approved by the last Legislative Assembly.
- The salary underfunding changed from \$169,579 to \$186,279, which is a net change of (\$16,700).
- (\$43,968) in Temporary Salaries; temporary position no longer needed for Vocational Rehabilitation because of reduced client load due to Order of Selection and the conversion to a computerized vocational evaluation.

- An increase of \$29,090 in Rentals/Leases, for office building rent, based on an increase in the rental rates for the 2015-2017 biennium.
- An increase of \$21,164 in Operating Fees and Services mainly attributed to an increase of utilization for housekeeping services at the Vocational Rehabilitation and outreach offices.
- (\$24,980) in Furniture and Equipment that was previously budgeted to replace furniture at the Residential Care Center and will no longer be needed.
- Grants, Benefits and Claims increased by \$607,615 and is mainly attributed to the following:
 - \$601,699 for a new 10 bed short term residential facility to provide crisis residential and social detoxification services.
 - \$5,916 for Provider inflationary increases of 4% each year of the biennium.

Senate Changes:

\$192,136 in total funds, of which \$181,498 is general fund to decrease the Governor's compensation package to reflect a change in the state employee performance increase from 3% - 5% to 2% - 4%, remove market policy point equity increase, and to remove the 1% retirement contribution.

\$1,479 in total funds, of which \$1,479 is general fund to decrease the annual provider inflation from 4% to 3% each year of the biennium.

This concludes my testimony on the 2015-2017 budget request for Badlands Human Service Center. I would be happy to answer any questions.